PTO/SB/22 (12-04)
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PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)		Docket Number (Optional)	
FY 2005 (Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).)		2801-0187P	
		Filed	April 9, 2004
Application Number 10/820,817-Conf. #88	99	riled	April 9, 2004
For SUSPENSION AEROSOL FORMULATIONS			
Art Unit 1615		Examiner	E. E. Silverman
This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.			
The requested extension and fee are as follows (check ti	me period desir	red and enter the a	ppropriate fee below):
	<u>Fee</u>	Small Entity Fee	
One month (37 CFR 1.17(a)(1))	\$120	\$60	\$ 120.00
Two months (37 CFR 1.17(a)(2))	\$450	\$225	_\$
Three months (37 CFR 1.17(a)(3))	\$1020	\$510	\$
Four months (37 CFR 1.17(a)(4))	\$1590	\$795	\$
Five months (37 CFR 1.17(a)(5))	\$2160	\$1080	\$
Applicant claims small entity status. See 37 CFR 1.27.			
X A check in the amount of the fee is enclosed.			
Payment by credit card. Form PTO-2038 is attached.			
The Director has already been authorized to charge fees in this application to a Deposit Account.			
The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 02-2448 . I have enclosed a duplicate copy of this sheet.			
<u> </u>	, Thate ende		py or ano oneon
I am the applicant/inventor.			
assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).			
attorney or agent of record. Registration Number			
attorney or agent under 37 CFR 1		29 077	
Registration number if acting under	37 CFR 1.34	28,977	·
1 1 myring		June 16, 2006	
Sign/sture //		Date	
Gerald M. Murply, Jr. Typed of printed name		(703) 205-8000 Telephone Number	
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more			
than one signature is required, see below.			
Total of 1 forms are submitted.			

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